

Work Order ID 91687***91687***

Page 1

October-15-12 10:32:18 AM

Item ID: D3188-6

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Spacepod Body

Stop

NS2

Start Date: 10/15/12

Start Qty: 1.00

1

Cust Item ID:

Required Date: 11/05/12

Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:	Process Plan: <u>ML5</u>	Date: <u>12-10-15</u>	Tooling:	Date: _____	Run	Start	*NR1*
	QC: _____	Date: _____	SPC (Y/N): _____	Date: _____	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
100	QC6- Inspect dimensions to drawing	0.00	(DA 16 8-89)	3/3/21					
100 QC		0.00							
Quality Control	Memo								
	Check for void spot and pins.								
110	Identify as per dwg & Stock Location: <u>BT</u>	0.00							
110 Packaging	Memo	0.00							
Packaging									
120	QC21- Final Inspection - Work Order Release	0.00							
120 QC	Memo	0.00							
Quality Control									

13/3/14MF
13-3-01

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>			
Centre Not Concentric to O/S				BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>				
Cracks <input type="checkbox"/>				Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>				
Crushed/Crimped. <input type="checkbox"/>				Burrs <input type="checkbox"/>	Instructionis Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>				
Cuffs <input type="checkbox"/>				Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>					
Heat Treat <input type="checkbox"/>				Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
Inspection Strip in Tube <input type="checkbox"/>				Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>				
Ripples in Bend <input type="checkbox"/>				Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>						
Torque Waves in Extrusion <input type="checkbox"/>				Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
Turning Sequence <input type="checkbox"/>				Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						
Wave/Twist in Tube <input type="checkbox"/>				Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>						

Picklist Print

October-15-12 10:32:17 AM

Page 1

Work Order ID: 91687

Parent Item: D3188-6

Parent Item Name: Spacepod Body

Start Date: 10/15/12

Required Date: 11/05/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 09-02-05 New Issue DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3188-2M SPACEPOD BODY RH		Manufactured	No			100	Each	0.0000	1	1		85 13-03-01	

91703

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>						
Root Cause Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>		Date	Step			Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date
FAULT CATEGORY												
Landing Gear Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube <input type="checkbox"/>				General Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/>		Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructor's Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/>		Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/>		Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> <input type="checkbox"/> Other		

8 1 7 1 6 1 5 1 4 1 3 1 2 1 1

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GENERAL NOTES:

1) MATERIALS:

RESIN: EPOCAST 50-A/9816 OR DERAKANE 470-36/411/510A40

FIBER: 9.7 oz 7781 WEAVE "S" GLASS (9 oz SATIN)
12 oz UNIDIRECTIONAL FIBERGLASS ("12 oz UNIDIRECTIONAL")
18 oz ROVING "E" GLASS (18 oz CLOTH)
OWENS CORNING MILLED FIBERS, "E" GLASS
3M K20 GLASS BUBBLES

FOAM: A500 CORE CELL
OR DIVINCELL
OR AIREX
OR KLEGECCELL
FILL VOIDS IN FOAM WITH PASTE MADE FROM MILLED FIBERS & RESIN

1. MOLD SCHEDULE:

PART	LAYUP	TRIM AND DRILL
D3188-1M1-1/5	DT8003	DT8501
D3188-2M1-2/6	DT8004	DT8502
D3188-3M1-3/7	DT8500	DT8501

- 2) FINISH: INSIDE/OUTSIDE WITH GREY DUPONT HIGHBUILD PRIMER 1144-S.
APPLY ANTI-SKID PAINT TO TOP SURFACE OF PODS PER QSI 005 4.4
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: D3188-1 = N/A
D3188-2 = N/A
D3188-3 = N/A
D3188-5 = N/A
D3188-6 = N/A
D3188-7 = N/A
- 8) REFERENCE DIMENSIONS MATCH AIRCRAFT CONTOUR AND DOOR OPENING
- 9) LAMINATE PER DART QSI 006. LAMINATION SCHEDULE PER THIS DRAWING

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WORK ORDER

NO. 911687 MLS

12-10-15

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F	REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENTS STANDARDS; ADD CHAMFER IN SECTIONS A-A (ZN C7-10) & H-H (ZN B7-11)	RF	09.07.13
E	ADD HYSOL/FIBER OPTION ON SHEET 11	CB	07.04.02
D	UPDATE DIMENSIONS	LE	07.02.22
C	REMOVED D0600-XXX LABELS	LE	06.12.13
B	UPDATED DWG TO MATCH PRODUCT ADDED D3188-1M1-2M1-3M1-5/6/7	CB	06.10.06
A	NEW ISSUE	CP	03.04.03
REV.	DESCRIPTION	BY	DATE
DESIGN	JB	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>W</i>	DRAWING NO.	REV. F
MFG. APPR.	<i>W</i>	D3188	SHEET 1 OF 11
APPROVED	<i>W</i>	TITLE	SCALE
DE APPR.	<i>W</i>	SPACEPOD BODY	NTS
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8 1 7 1 6 1 5 1 4 1 3 1 2 1 1

C

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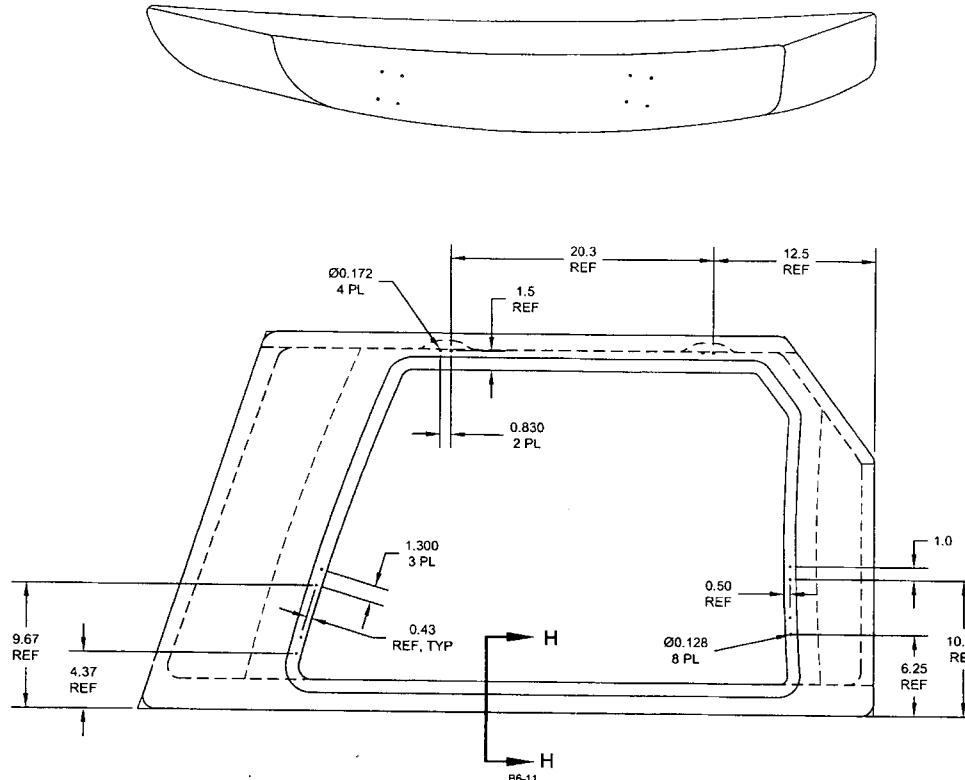
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91687



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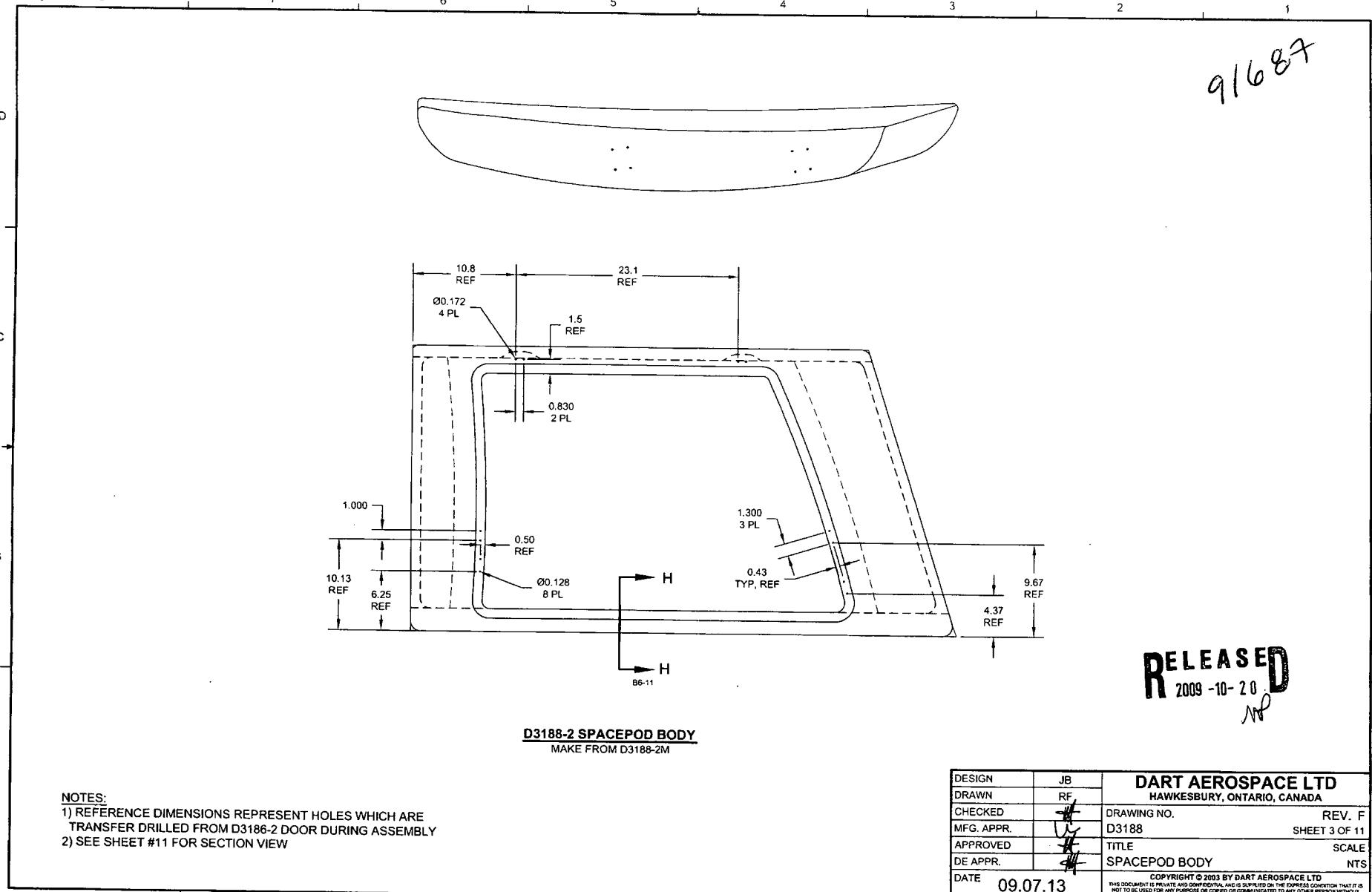
D3188-1 SPACEPOD BODY
MAKE FROM D3188-1M

NOTES:

- 1) REFERENCE DIMENSIONS REPRESENT HOLES WHICH ARE TRANSFER DRILLED FROM D3186-1 DOOR DURING ASSEMBLY
- 2) SEE SHEET #11 FOR SECTION VIEW

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DE APPR.	<input checked="" type="checkbox"/>	TITLE
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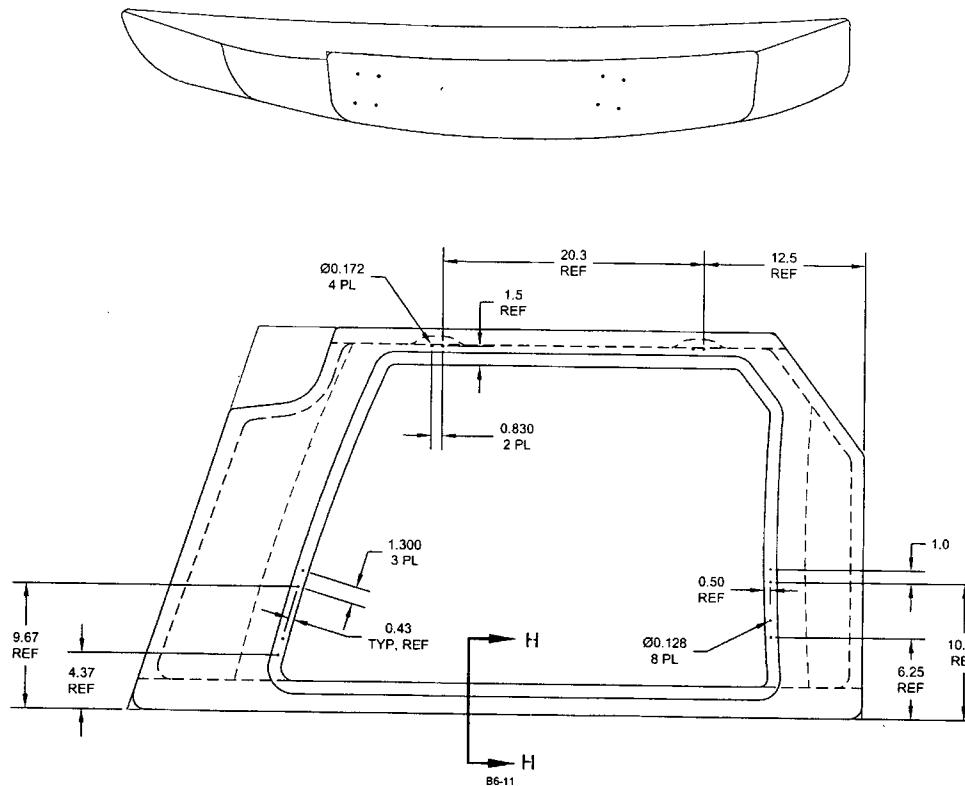
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D3188-3 SPACEPOD BODY
MAKE FROM D3188-3M

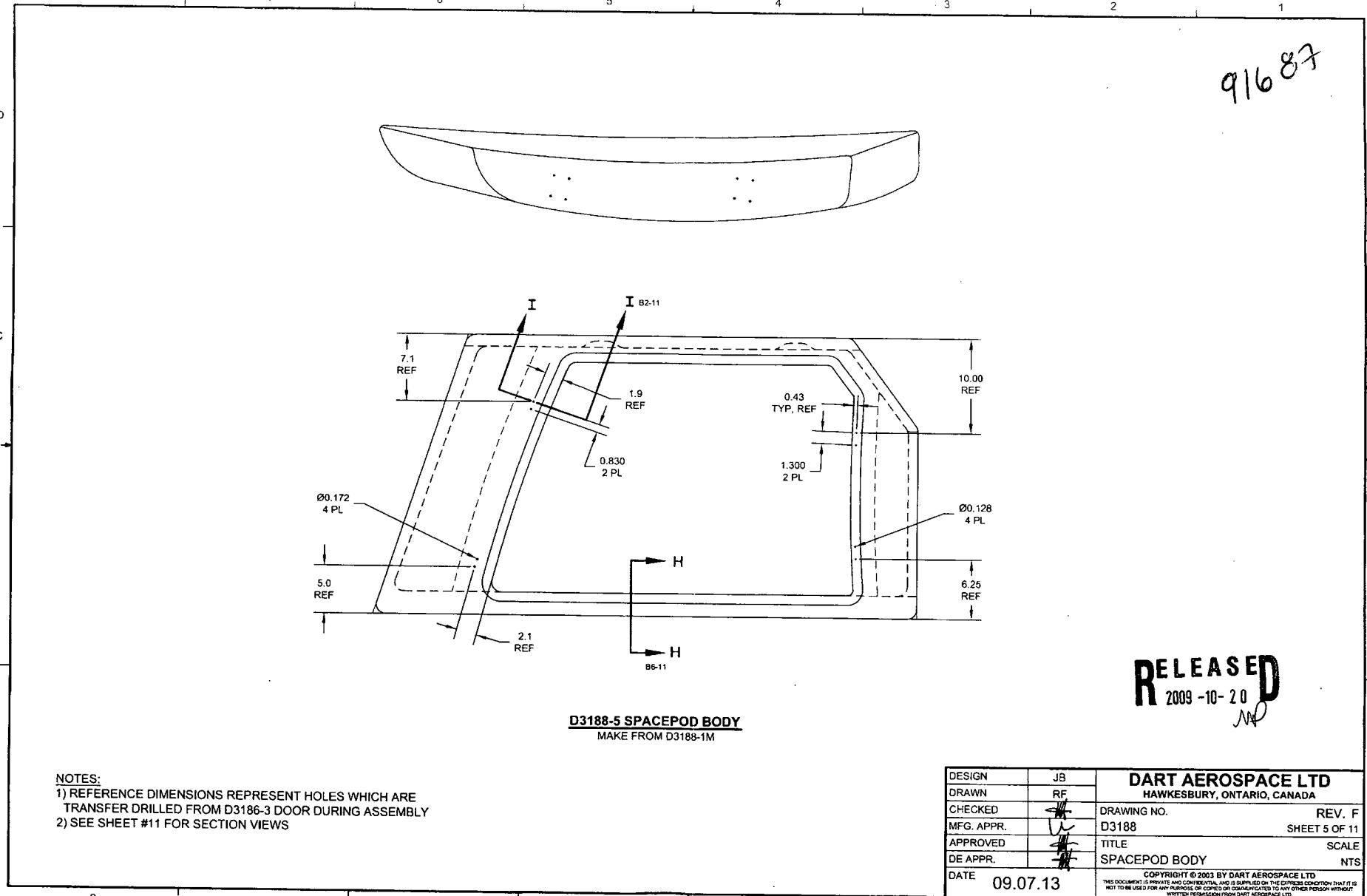
NOTES:

- 1) REFERENCE DIMENSIONS REPRESENT HOLES WHICH ARE TRANSFER DRILLED FROM D3186-1 DOOR DURING ASSEMBLY
- 2) SEE SHEET #11 FOR SECTION VIEW

8 1 7 1 6 1 5 1 4 1 3 1 2 1 1

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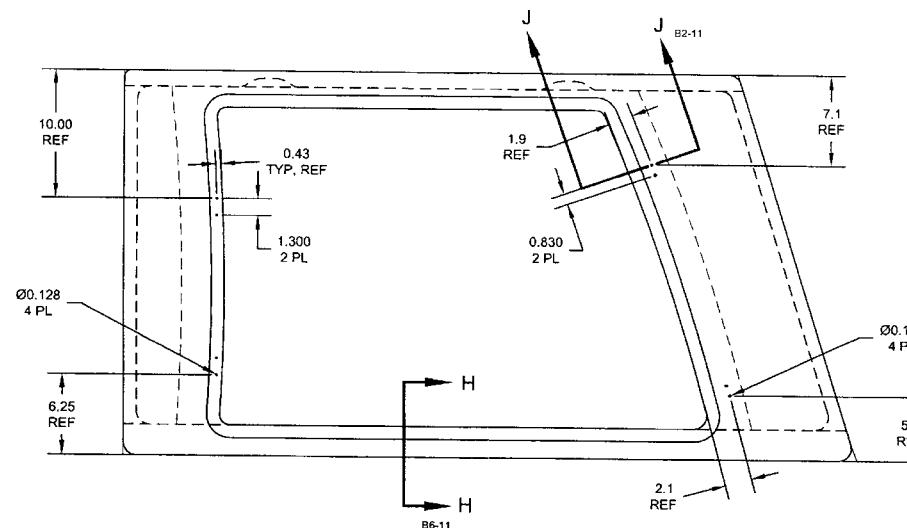
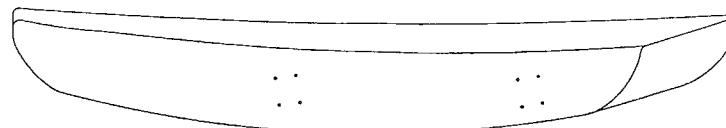
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D3188-6 SPACEPOD BODY
MAKE FROM D3188-2M

91687

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2009-10-20
MM

NOTES:

- 1) REFERENCE DIMENSIONS REPRESENT HOLES WHICH ARE TRANSFER DRILLED FROM D3188-4 DOOR DURING ASSEMBLY
- 2) SEE SHEET #11 FOR SECTION VIEWS

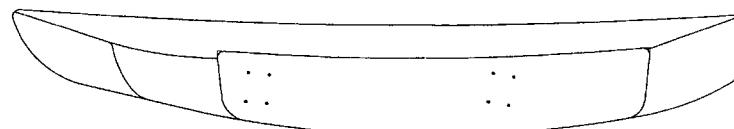
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APPROVED	MM	D3188
DE APPR.	MM	SHEET 6 OF 11
DATE	09.07.13	SCALE
		NTS
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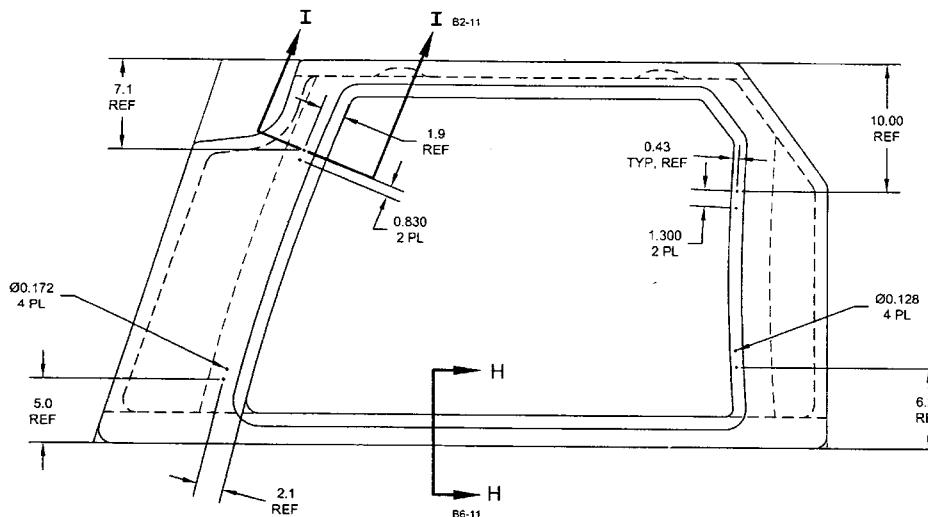
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D3188-7 SPACEPOD BODY
MAKE FROM D3188-3M

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2009-10-20
NP

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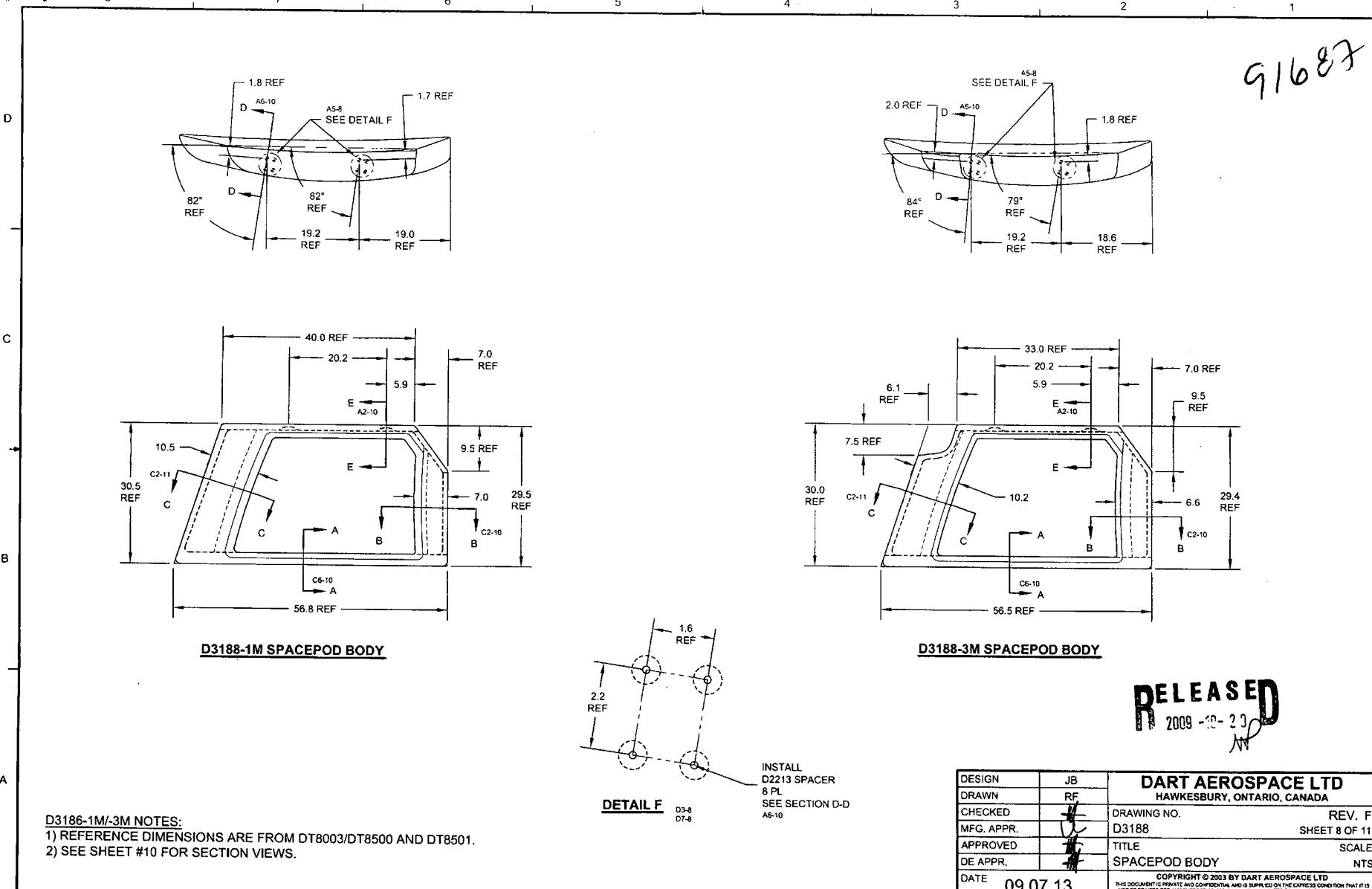
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NOTE:

- 1) REFERENCE DIMENSIONS REPRESENT HOLES WHICH ARE TRANSFER DRILLED FROM D3186-3 DOOR DURING ASSEMBLY
- 2) SEE SHEET #11 FOR SECTION VIEWS

8 7 6 5 4 3 2 1

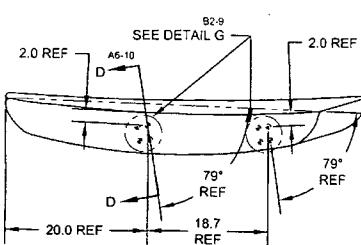
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CHECKED	<input checked="" type="checkbox"/>	DRAWING NO.	REV. F
		D3188	SHEET 7 OF 11
MFG. APPR.	<input checked="" type="checkbox"/>	TITLE	SCALE
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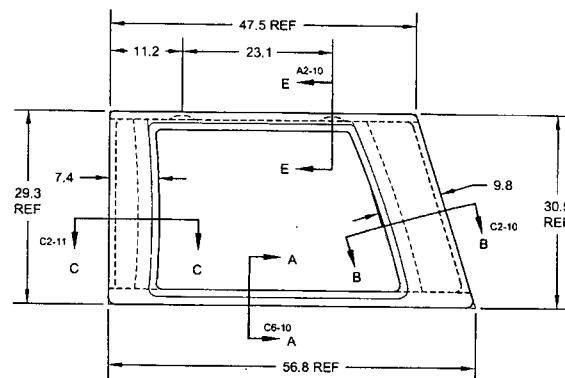
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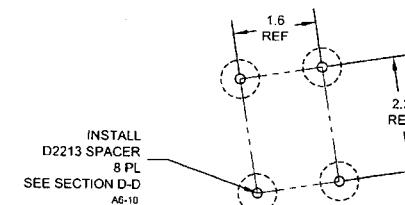
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D3188-2M SPACEPOD BODY

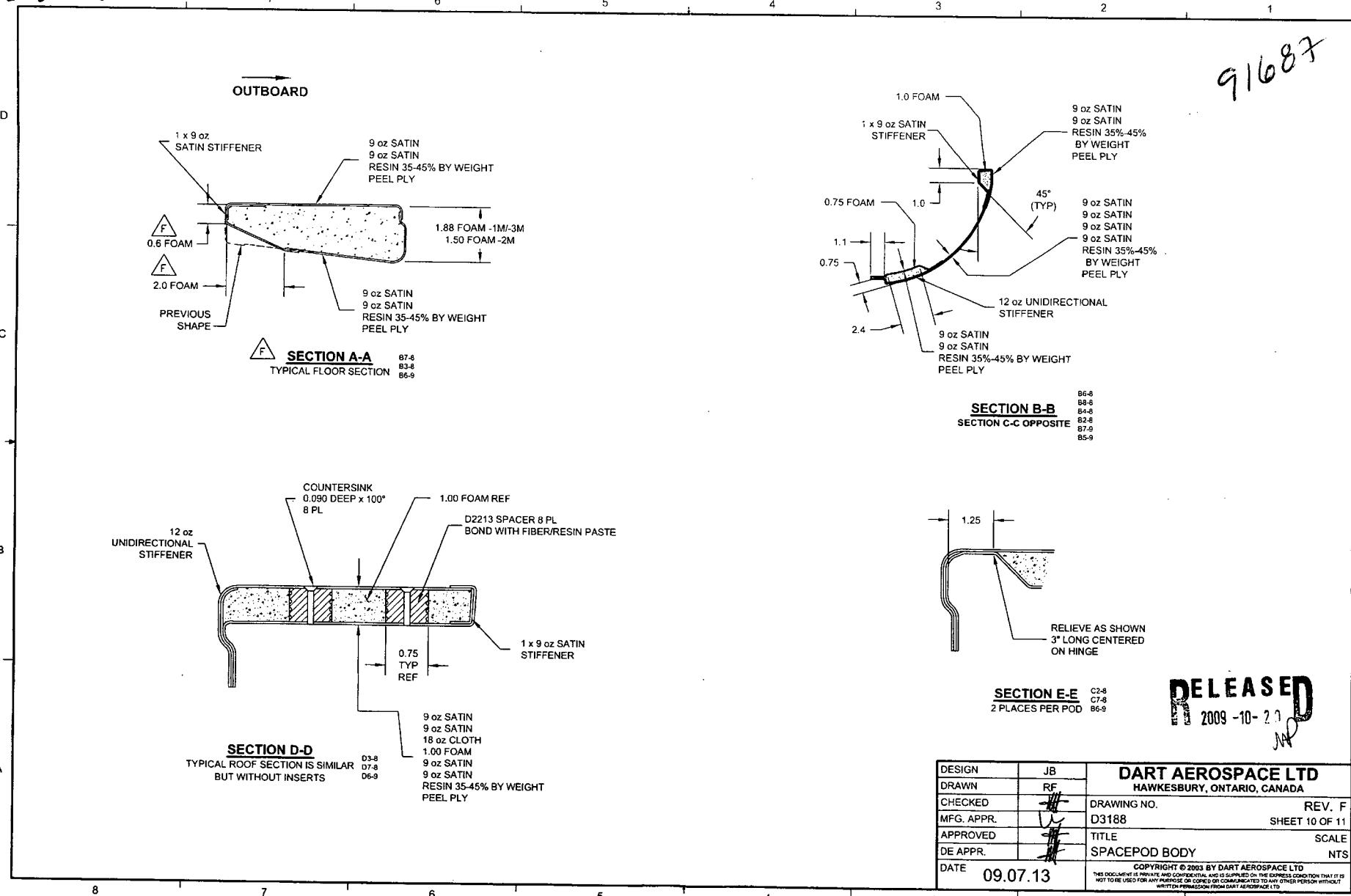
D3186-2M NOTES:

- 1) REFERENCE DIMENSIONS ARE FROM DT8004 AND DT8502.
- 2) SEE SHEET #10 FOR SECTION VIEWS.

DETAIL G D6-9

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2009-10-20
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91687

OUTBOARD

INSTALL AKS7-1032-130
INSERTS 29 PL
PER D3188-1T1 (D3188-1/3-5/7)
OR D3188-2T1 (D3188-2/6)

PREVIOUS
SHAPE



SECTION H-H
TYPICAL FLOOR SECTION

A5-2

A5-3

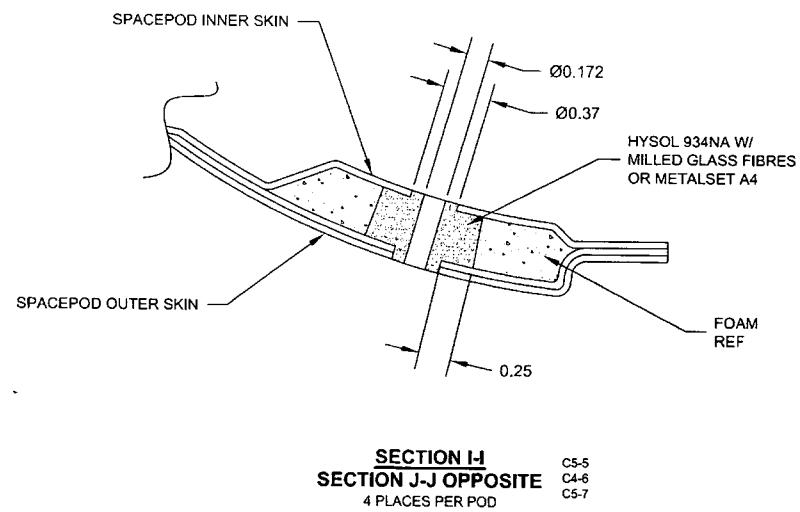
A5-4

A5-5

B5-6

B5-7

FOAM
REF



SECTION I-I
SECTION J-J OPPOSITE
4 PLACES PER POD

C5-5

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W/P

DESIGN	JB	DART AEROSPACE LTD	
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MFG. APPR.	<i>W</i>	D3188	SHEET 11 OF 11
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